Effective January 1, 2003 106465 77												7-	
	. !	SM	ALL EN	mry □	OR	OTHER SMALL							
TO	TAL CLAIMS	20					F	ATE:	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			10 minus 20=		. Ø		7	<b>(\$ 9</b> =		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =				<b>5</b>	(42=		OR	X84=	C(1)	
MULTIPLE DEPENDENT CLAIM PRESENT							1.	140=		OR	+280=	7	
* If the difference in column 1 is less than zero, enter *0" in column 2							OTAL	-	OR	TOTAL	7211		
10/18/04 CLAIMS AS AMENDED - PART II										Jun		0.4	
1	// (Column 1) (Co				ımn 2) (Column 3)			SMALL ENTITY			SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE /	
	Total	• 20·	Minus	•	20	• —	×	(\$ 9=		OR	X\$18=	. /	
	Independent	• 4	Minus	SALDEAS	4		2	(42=i		OR	X84≃		
Ц	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	140 <del>=</del>		OR	+280=		
7 7 17, 19								YOTAL		OR	TÖTAL ADDIT, FEE	/	
	· · · · · · · ·	AUL	XIT. FEE			ADDII. PEE							
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) Jest Jesa Ously For	PRESENT EXTRA	F	WE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.20	Minus	ئخ **	2.0	• /	] [,	<b>(\$ 9</b> =		OR	X\$18=		
	Independent	NTATION OF M	Minus	ENDEN	P CLAIM	= /		<b>(42=</b>		OA	X84=	200 00	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				COGILI		<b>'</b> [•	140=		OR	+280=		
							ADI	TOTAL		OR	TOTAL	20000	
(Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	$\Gamma$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		•		<b>(\$ 9=</b>		OR	X\$18=		
	Independent	<b>a</b>	Minus.	***	•		] <b> </b>	(42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]	V46=		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
-	"If the entry in column 1 is less than the entry in column 2, write "I" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number